

TRIENNIAL REVIEW GUIDELINES FOR MENTORS

The Nursing and Midwifery Council Standards to Support Learning and Assessment in Practice (NMC 2008) requires that all mentors on the local register should have a triennial review every 3 years.

This review is the responsibility of their employing organisation and as such it is anticipated that this will be integrated into current appraisal/development review mechanisms currently in place.

All mentors have their details held on the local register which is held by the Lincolnshire Interprofessional Practice Learning Unit. These details include your name and workplace, initial mentor preparation and subsequent updates and your branch of nursing or your midwifery qualification. In order to remain on this register you have to show that you have updated and maintained the requirements of mentoring.

The purpose of annual updating is to ensure that mentors:-

- Have current knowledge of NMC approved programmes
- · Are able to discuss the implications of changes to NMC requirements
- Have an opportunity to discuss issues related to mentoring, assessment of competence and fitness for safe and effective practice (NMC 2008)

You may have attended a group update face to face with other mentors, led by an educator, or you may have completed an update via a workbook or the on line mentor update available from the school of nursing. For practice representatives on PLT's you can achieve your update by attending at least 50% of the PLT meetings. You will need to have recorded the dates and detail of the method of update.

This should reflect the details on the mentor register, where your record is amended each time you update. These updates will also ensure you are aware of the student's programme and all the assessment documentation you complete when mentoring a student in practice.

Every three years you will also need to have mentored at least 2 students in practice. You should not keep details of the student's records or evidence of their mentoring but should be able to tell your manager who you have been mentoring and details of the experiences you had with them. You should have been involved in mentoring these students but may not always have signed off their assessment documents, for example if you have been the associate mentor.

Mentors should not keep copies of the student records for the purpose of this triennial review at all. There may however be other evidence you have within your professional portfolio and KSF evidence that supports this, for example any thank you cards received from students or your own reflection on mentoring a student in practice. These records can be shared with your manager if you wish.

Mentors are also required to provide evidence of Continuing Professional Development against the 8 domains that comprise the mentor standards (NMC 2008). The Mentor Resource Booklet contains examples of evidence mapped against the 8 domains.

Further Information on the Standards to Support Learning and Assessment in Practice can be obtained from www.nmc-ok.org

University of Nottingham Mentor web information at; www.nottingham.ac.uk/nursing/practice/mentors

Acknowledgement - this guidance is adapted from University of Nottingham Guidance (2008)



TRIENNIAL REVIEW DOCUMENTATION

RECORD OF MENTOR UPDATES		Start Date: 2008	
Name		Mentor □ Sign off Mentor □	
I completed a Mentor Update on.	(date)		
The Mentor Update was:	On line Face to Face Work Book PLT Activities		
I completed a Mentor Update on	(data)		
r completed a Mentor Opdate on	(date)		
The Mentor Update was:	On line Face to Face Workbook PLT Activities		
I completed a Mentor Update on	(date)		
The Mentor Update was:	On line Face to Face Workbook PLT Activities		
NB. At l	east one Mentor Update must be face to fa	ce within the last 3 years	
I confirm have had the opportunity to discuss issues related to mentoring, assessment of competence and fitness for safe and effective practice during this past year: Year 1 Yes/No			
	Year 2 Year 3	Yes/No Yes/No	
MENTORING STUDENTS	Year 2	Yes/No	
	Year 2	Yes/No	
	Year 2 Year 3	Yes/No Yes/No	
I can confirm that during the prev	Year 2 Year 3	Yes/No Yes/No (insert number of students)	
I can confirm that during the previous Mentor Signature	Year 2 Year 3	Yes/No Yes/No (insert number of students) Date	
I can confirm that during the previous Mentor Signature TRIENNIAL REVIEW MEETING	Year 2 Year 3 rious 3 years I have acted as a Mentor to	Yes/No Yes/No (insert number of students) Date	
I can confirm that during the previous Mentor Signature TRIENNIAL REVIEW MEETING I can confirm that	Year 2 Year 3 rious 3 years I have acted as a Mentor to(inser	Yes/No Yes/No (insert number of students) Date	
I can confirm that during the previous Mentor Signature TRIENNIAL REVIEW MEETING I can confirm that Attended annual mentors update Mentored a minimum of two students	Year 2 Year 3 rious 3 years I have acted as a Mentor to(inser	Yes/No Yes/No (insert number of students) Date t name) has Yes/No*	
I can confirm that during the previous Mentor Signature TRIENNIAL REVIEW MEETING I can confirm that Attended annual mentors update Mentored a minimum of two students	Year 2 Year 3 rious 3 years I have acted as a Mentor to	Yes/No Yes/No (insert number of students) Date t name) has Yes/No* Yes/No*	
I can confirm that during the previous Mentor Signature TRIENNIAL REVIEW MEETING I can confirm that Attended annual mentors update Mentored a minimum of two stud Demonstrated evidence of CPD of	Year 2 Year 3 Your 3 years I have acted as a Mentor to (insert a x 3) Year 1 year 2 years a mentor to a years a mentor to	Yes/No Yes/No (insert number of students) Date t name) has Yes/No* Yes/No* Yes/No*	
I can confirm that during the previous Mentor Signature TRIENNIAL REVIEW MEETING I can confirm that Attended annual mentors update Mentored a minimum of two stud Demonstrated evidence of CPD of Assessor Signature	Year 2 Year 3 rious 3 years I have acted as a Mentor to (insert a x 3) lents in the last 3 years confirming compliance to mentor standard	Yes/No Yes/No (insert number of students) Date t name) has Yes/No* Yes/No* Yes/No*	
I can confirm that during the previous Mentor Signature TRIENNIAL REVIEW MEETING I can confirm that Attended annual mentors update Mentored a minimum of two stud Demonstrated evidence of CPD of Assessor Signature Print Name	Year 2 Year 3 rious 3 years I have acted as a Mentor to (inselvant) x 3 lents in the last 3 years confirming compliance to mentor standard	Yes/No Yes/No (insert number of students) Date t name) has Yes/No* Yes/No* Yes/No*	

*delete as appropriate



Evidence of Continuous Professional Development

MENTOR STANDARD

Mentor Standard	Learning Activity and Date	Evidence
Establishing effective working relationships		
Facilitation of learning		
Assessment and accountability		
Evaluation of learning		
Creating an environment of learning		
Context of practice		
Evidence based practice		
Leadership		

It is the responsibility of the mentor to complete this form showing learning activities taking place in each of the three years prior to review. The mentor's line manager or supervisor(assessor) will sign and confirm they have achieved/not achieved the mentor standard and on their request the mentor will provide the relevant additional evidence to demonstrate compliance to ensure continuing approval to practice as a mentor. This form must be used in conjunction with the Triennial Review Guidelines (adapted from University of Nottingham, 2008)

The information provided will be held by the Lincolnshire Interprofessional Practice Learning Unit in accordance with the Data Protection Act 1998 and will not be used for any other purpose than the management and quality assurance of educational placements. By signing the form overleaf you are providing permission to have your details listed on the live register of mentors.

When the Triennial review has been fully completed the original copy should be retained in your induction, training and development portfolio, a copy retained by your manager and a copy sent to:

Lincolnshire IPLU, Greetwell Place, Limekiln Way, Lincoln. LN2 4US